

EXHIBIT 6

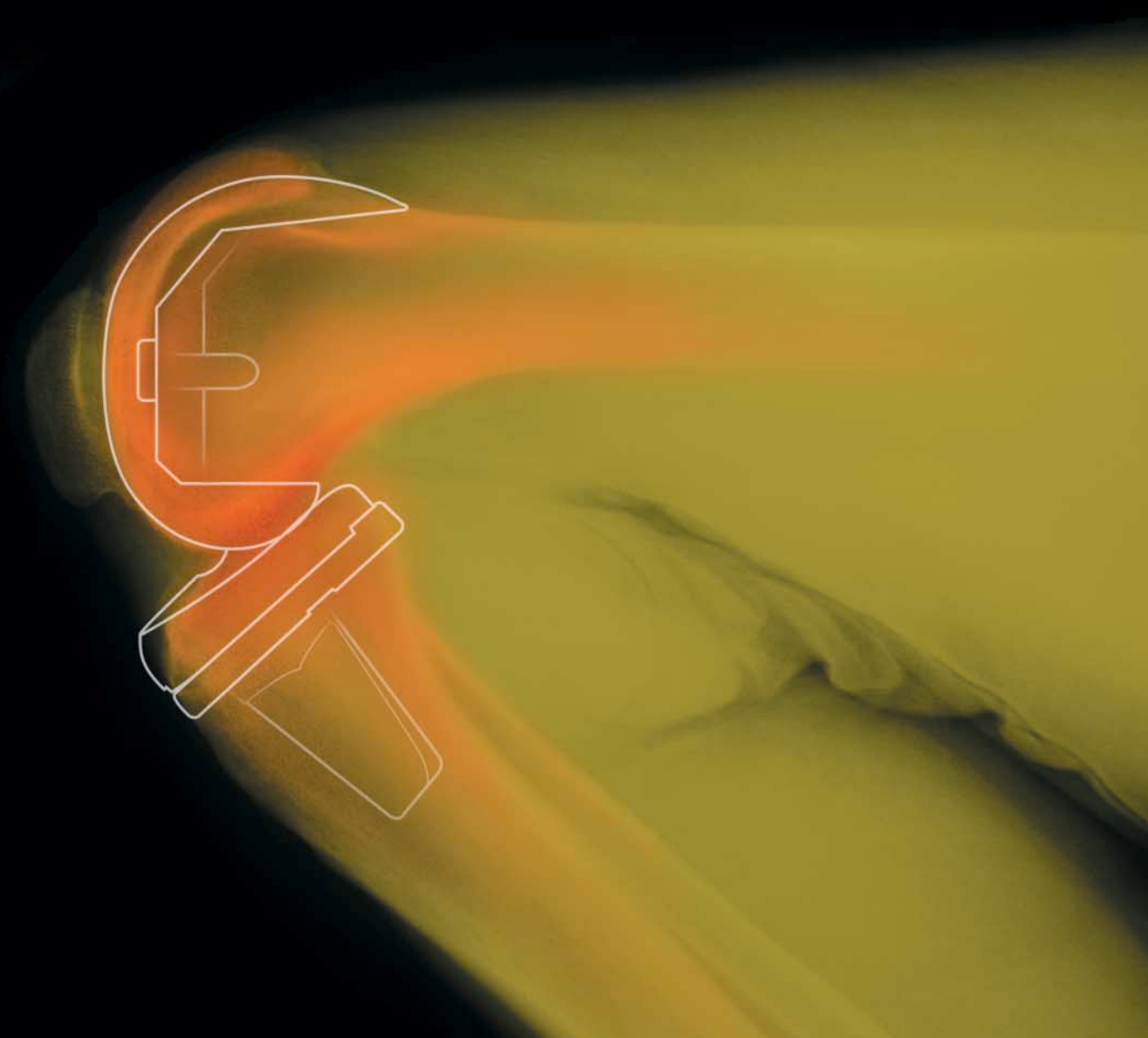


NexGen[®] System
Complete Knee Solution

LEGACY[®]
KNEE
LPS-FLEX



FROM





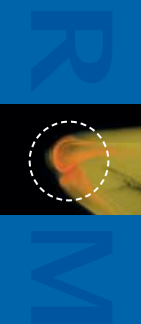
LPS-FLEX

**What postoperative
range of motion can your
TKA patients expect?**





For patients with the ability and desire to perform high-flexion activities, implant design should not limit postoperative range of motion. Now you can offer a *NexGen*® Complete Knee Solution designed to accommodate resumption of high-flexion daily activities. Attention to patient selection, surgical technique, implant design, and rehabilitation can help enhance the chances for success.



**LPS - FLEX**

The anatomy of flexion

Many activities of daily living require flexion beyond 120 degrees. Consider climbing stairs (75-140 degrees), sitting in a chair and standing up again (90-130 degrees), or squatting (130-150 degrees).¹ The typical pattern of femoral rollback is increased in deep flexion, as the lateral femoral condyle moves even further posteriorly, increasing the amount of rotation. Also, the patella clears the femoral groove completely, contacting only the femoral condyles.²





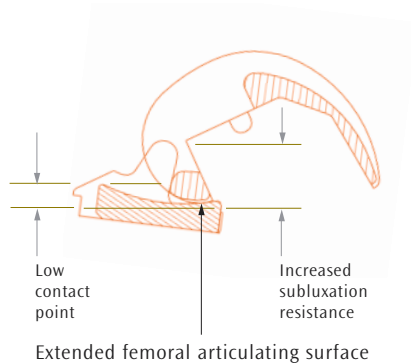
Accommodating flexion with the *NexGen Legacy LPS-Flex Knee*

The LPS-Flex Knee extends the *NexGen Complete Knee Solution* to patients capable of up to 155 degrees of active flexion.

Accommodating Deep Flexion

Extended posterior condyles on the femoral component facilitate tibiofemoral contact to support deep flexion up to 155 degrees. Conforming geometry of the LPS-Flex femoral component with its articulating surface allows minimal loss of contact area in deep flexion.

RANGE OF MOTION



Flexion to 155°

Providing Extensor Mechanism Clearance

To reduce extensor mechanism tension and provide greater clearance for the patellar tendon during deep flexion, the articular surface features a deep anterior patellar cut-out.



Increased patella clearance

Enhancing Stability

A modified posterior stabilized cam/spine mechanism increases subluxation resistance at deep flexion angles. To provide additional stability and fit, the design includes proportionally sized pegs on the femoral component.



Modified cam/spine



LPS-FLEX

Providing a full spectrum of NexGen Solutions

The LPS-Flex Knee represents a new and distinct choice from the wide selection of NexGen Knees, which are compatible with CR/CS or PS philosophies for primary or revision cases. The LPS-Flex femoral component extends the NexGen Complete Knee Solution to patients capable of up to 155 degrees of active flexion. Now you have the freedom to select the best component combination for a given patient based on preoperative and intraoperative assessment.

The deeper anterior flange on the femoral component aids in patellar tracking during extension and flexion.

The deep anterior patellar cut-out on the tibial articulating surface helps reduce tension and provide greater clearance for the extensor mechanism.

A modified cam/spine mechanism allows for stability, posterior clearance, and protection against subluxation during deep flexion.





LPS-Flex Fixed Bearing Knee

The fixed bearing articulating surface mates with current *NexGen* tibial base plates (available with stem extensions and tibial augments), and employs the same polyethylene dovetail locking mechanism. Tibial component implantation uses existing *NexGen* instrumentation.

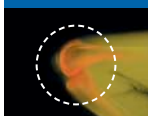


Enabling Success

The LPS-Flex Knee allows use with the *NexGen* instrument system of your choice:

- *MICRO-MILL*® Instrumentation Milling/5-in-1 Sawblade Options
- *Multi-Reference*™ 4-in-1 Femoral Instrumentation System
- Intramedullary Instrumentation System
- Epicondylar Instrumentation System
- *V-STAT*® Variable Soft Tissue Alignment Tensor

Only one additional instrument – the Posterior Recut Guide – is required to implant the LPS-Flex Knee.



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M

References

1. Niwa S. Hyperflexion in Japanese knee replacement design and clinical results. Paper presented at: The Wellington Knee Surgery Unit's Eighth International Teaching Meeting; March 5-6, 1998; London, England.
2. Hefzy MS, Kelly BP, Cooke TDV. Kinematics of the knee joint in deep flexion: a radiographic assessment. *Med Eng Phys.* 1998;20:302-307.

For more information about
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